## 121000190920

| (Re                     | questor's Name)   |           |
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|                         | siness Entity Nan | ne)       |
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| (Do                     | cument Number)    |           |
| ·                       | ·                 |           |
| Certified Copies        | _ Certificates    | of Status |
|                         |                   |           |
| Special Instructions to | Filing Officer:   |           |
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## **COVER LETTER**

| ro:       | Registration So<br>Division of Cor |   |   | •  |
|-----------|------------------------------------|---|---|--|
| **:****** |                                    | os LLC name change to SwyftP              | ic LLC  |  |
| SUBJEC    | .:                                 | Name of Limi                              | ted Liability Company   |  |
| The encl  | osed Articles of                   | Amendment and fee(s) are subr             | mitted for filing.  |  |
| olease re | cturn all correspo                 | ondence concerning this matter t          | to the following:   |  |
|           |                                    | Roger Jacknin                             |   |  |
|           |                                    |   | Name of Person  | <del></del>  |
|           |                                    | PremoPhotos LLC (Name C                   | Change to: SwyftPic LLC)  |  |
|           |                                    |   | Firm/Company  |  |
|           |                                    | 1010 Brickell Ave #1804                   |   |  |
|           |                                    |   | Address   |  |
|           |                                    | Miami, Florida 33131                      |   |  |
|           |                                    |   | City/State and Zip Code   | ··············   |
|           |                                    | Rjacknin@gmail.com                        |   |  |
|           |                                    | E-mail address: ()                        | to be used for future annual report notifi                          | cation)  |
| For furtl | her information                    | concerning this matter, please co         | all:  |  |
| Roger J   | acknin                             |   | 561 603-4291  |  |
|           | Name                               | of Person                                 | at ()<br>Area Code Daytime  | Telephone Number   |
| Enclose   | d is a check for                   | the following amount:                     |   |  |
| □ \$25    | .00 Filing Fee                     | S30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tailahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

|   | (A Florida Limited               | Liability Company)                | <del></del>                       |
|---|----------------------------------|-----------------------------------|-----------------------------------|
| The Articles of Organization for this Limited L   | iability Company                 | were filed on April 23, 202       | and assigned                      |
| Florida document number L21000190920  |                                  |                                   |                                   |
| This amendment is submitted to amend the foll   | owing:                           |                                   |                                   |
| A. If amending name, enter the new name o   | f the limited liab               | oility company here:              |                                   |
| SwyftPic LLC  |                                  |                                   |                                   |
| The new name must be distinguishable and contain the v  | vords "Limited Liabi             | lity Company," the designation "  | LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applic  | rable:                           | Same Principal Office             |                                   |
| (Principal office address MUST BE A STREE   | (T ADDRESS)                      |                                   | 021<br>12                         |
|   |                                  |                                   | <u> </u>                          |
|   |                                  |                                   | 20                                |
| Enter new mailing address, if applicable:   |                                  | Same Mailing Address              | 05 <b>2 ∏</b>                     |
| (Mailing address MAY BE A POST OFFICE BOX)  |                                  |                                   |                                   |
|   | <u>-</u>                         |                                   | FE N                              |
|   |                                  | <del></del>                       |                                   |
| B. If amending the registered agent and/or ragent and/or the new registered office address  Name of New Registered Agent: | egistered office : ss here: Same | address on our records, <u>en</u> | ter the name of the new registere |
| New Registered Office Address:  | Same                             |                                   |                                   |
| New Registered Office Address.  | -                                | Enter Florida street ado          | dress                             |
|   |                                  |                                   | Florida                           |
|   | -                                | City                              | Zip Code                          |
| New Registered Agent's Signature, if changing I   | Registered Agent:                |                                   |                                   |

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added</u> <u>or removed from our records</u>:

| MGR = M $AMBR = A$ | lanager<br>uthorized Member | MA      |                |
|--------------------|-----------------------------|---------|----------------|
| <u>Title</u>       | <u>Name</u>                 | Address | Type of Action |
|                    |                             |         | □ Add          |
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|                          | moPhotos LLC to SwyftPic LLC  |
|--------------------------|---|
| -                        |   |
| Pei                      | formed the necessary due diligence to the ensure the name is available.   |
| Ify                      | ou have any additional questions, please email or call.   |
| Th                       | ank you!  |
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| reffect<br><u>te:</u> If | date, if other than the date of filing:   |
| cord s<br>s filed        | pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the |
| ed _                     | egust 17. 2021  |
|                          |   |
|                          | Roger Jackning Signature of a member or authorized representative of a member   |